East Prince Health

ANNUAL REPORT 2000-2001

Contributing to a brighter and healthier future for families, individuals and communities.

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East Prince Health

Annual Report

2000 - 2001

Table of Contents

Executive Remarks ..... 1 - 2

Mission, Vision, Values, Statements 3

Regional Overview ..... 4 - 10

Our services

Acute Care ..... 11 - 12

Child, Youth & Family ..... 13 - 16

Continuing Care / Seniors ..... 16 - 20

Diagnostics / Therapeutics/ Support 20

Income Support 21

Mental Health / Psychiatry / Addictions 22

Organizational Development 23

Regional Initiatives 26

Financials 29

Features

Facility Planning ..... 8 - 9

Volunteerism ..... 24 - 25

Wellness 25

Remarks from the Board Chair

On behalf of the East Prince Health Board, I am pleased to present this annual review of our regional activities.

This year has presented many challenges for those providing healthcare in the East Prince region. Some of our challenges are locally-based but many are universal in the fact that there are many common challenges which face healthcare services throughout the world.

Aside from assuring the provision of high quality health and social services, our health region has also taken on the challenge of preparing for accreditation renewal and continued preparation for construction of and transition to the new health facility to replace Prince County Hospital. Like so many other healthcare services, we are faced with ongoing healthcare provider recruitment and retention issues. We are working closely with government as we continue to strive for effective staffing levels.

The year 2001 was the International Year of the Volunteer and our region was involved in many activities to recognize and show appreciation of these very valuable people who contribute their time and energy so graciously to our clients, physicians and staff.

Our Board devoted some time to work with staff, physicians and the community in developing a new mission statement for the region. This statement is detailed in the coming pages of this report. The statement was developed to link our daily work to the overall purpose of maintaining and attaining the best possible health for families, individuals and communities. We strived to link this statement to what East Prince Health truly stands for as well as what we believe in and work toward as we go about our daily activities.

After almost eight years of service as your regional Board Chair, I am stepping down in my role in order to take on new challenges and open the door to a new regional Board leader. Over the years, I have worked with a wonderful team of dedicated healthcare providers and Board members and I will always remember the remarkable spirit of those who serve East Prince Health and our community.

I am very pleased to introduce Dr. Allen MacLean as my successor in the Chair position. Allen has served the community well over the years with his dedication to his Summerside dental practice and numerous voluntary roles. He has a keen interest in contributing to the health of citizens in our region and beyond.

I hope you enjoy this report and encourage you to become an active participant in the health of our community.

Katherine Kelly
East Prince Health Board Chair

Remarks from the C.E.O.

I wish to bring you warm greetings on behalf of all staff, physicians and volunteers who serve the community at East Prince Health. Working in healthcare is both a very rewarding and demanding field of work. It takes a very special person to display such compassion for the community, to dedicate so much time and energy to the cause of illness treatment and prevention.

Over the past year, aside from the many regular duties, those who work at East Prince Health were challenged to increasingly contribute to the overall wellness of our community. As our many services become more dependent on each other to better serve our clients, we see that healthcare must involve consideration of the whole person and the factors which contribute to an overall state of well being. Recognizing and dealing with the factors which contribute to the mental, physical, social and spiritual dimensions of health is really what healthcare is about these days.

Certainly the region's efforts to renew its accreditation status is an indicator of how we continue to strive for excellence. There were many hours spent in group discussion over our standards of service and care along with the effort to prepare for transition to the new health facility to replace Prince County Hospital. We have many exciting challenges and opportunities these days to help shape our future.

As we look toward the future, the region is focusing on a long-range strategic planning process which is complementary to the strategic planning work being carried out across the province's entire health and social services system. We realize that we all share common priorities.

Throughout all these efforts, team/relationship building among our numerous staffs, physicians and volunteers is an important aspect of our regional operations. As we are faced with our many daily challenges, it is teamwork that truly helps us accomplish our tasks. We strive to accomplish team successes so that clients may benefit from a "holistic" or whole person approach to excellence in care and service.

We have a growing reputation as a pilot site for many innovative healthcare projects. This distinguishing aspect of our region has enabled staff to look "outside the box" to seek new and innovative ways to improve health and social services. The many regional activities noted in this report are a testament to that way of thinking, particularly in our efforts toward improving community wellness and empowering people to assist in personal health management.

Another area which East Prince Health holds distinction is its effort toward building a shared decision-making environment. We have completed a pilot project to build a shared decision making process that can be adopted throughout our region and have already involved our nursing staff in incorporating the process in their workplace.

I hope that you enjoy reading this report.

David B. Riley - C.E.O., East Prince Health

East Prince Health Vision & Mission

Our vision:

East Prince Health

Contributing to a brighter and healthier future for families, individuals, and communities.

Our mission:

East Prince Health will support and encourage individuals, families, and communities to attain and maintain their best possible health.

In order to accomplish this mission, East Prince Health has three distinct areas of responsibility:

Quality health and social services

Appropriate to their need, people will receive health and social services that make a difference to their quality of life:

- people will have access to an integrated system of quality health and social services;
- people will be treated with dignity and respect while receiving services;
- people will know about available services and how to access them.

Education and information

People will understand:

- the broad definition of health;
- the broad determinants which affect health;
- how to take responsibility for their own health;
- how to use the health system appropriately.

Partnering for health

Partnerships in service:

- People will have access to an integrated system of quality health and social services as a result of East Prince Health partnering with other health and social services providers.

Partnerships for a healthier community

- Individuals, families, and communities will be as healthy as possible as a result of East Prince Health partnering with others to positively affect the determinants of health.

Regional Overview

East Prince Health is one of five regional health authorities on Prince Edward Island - serving the broad health needs of individuals, families and communities. More than one thousand employees, with assistance from almost 500 volunteers, provide a wide range of health services to more than 40,000 residents who live in the area lying approximately between Ellerslie and Crapaud, Prince Edward Island. Many of the region's services meet some of the health needs of West Prince residents as well.

East Prince Health offers a multi-service team approach to the care process. The region is founded on the principles of community development. Local communities help to determine strategies to improve the many aspects of life in East Prince.

The region is currently working closely with the provincial departments of Health and Social Services, Treasury and Public Works to plan and construct a new regional health facility to replace the current Prince County Hospital located in Summerside. The planning process includes a major emphasis on redesigning services to reflect current and future trends in health care. Construction began in June 2001.

One way East Prince Health involves the community in the service delivery process is through an ongoing series of focus groups, community meetings and public consultations. Communication is also shared throughout the year via newsletters, newspaper inserts, public announcements, special events and broad community interaction of staff, physicians and volunteer service providers.

The region is governed by a nine-member community Board which is responsible for the planning and delivery of health services. The Board remains committed to providing a broad base of high quality health services to support citizens in their efforts to maintain and improve their level of health and well-being.

An overriding goal of the region is to achieve an appropriate balance among all components of care: promotive, preventive, curative, rehabilitative and supportive with a nod to responsible financial management. With this in mind, staff, physicians and volunteers at East Prince Health participated in a comprehensive, all-service accreditation process in 1998 and 2001 with a focus on quality improvement.

The East Prince Health Board for 2000-2001 included:

Katherine Kelly, Board Chair - Summerside
Dr. Allen MacLean, Vice Chair - Summerside
Stewart Affleck - Bedeque
Gertrude Trainor - Shamrock
Darcy Sark - Lennox Island
Ron Maynard - Tyne Valley
Barry Murray - Kensington
Carol Marie Peters - Summerside
Henri Gallant - Wellington

An Overview of Services

Acute Medical
Prince County Hospital
Stewart Memorial Hospital

Child, Youth & Family Services
Speech-Language Pathology
Prenatal Nutrition Counseling
Visiting Homemakers
One-on-One Youth Counseling
Adoption and Foster Care Service
Child Protection
Public Health Nursing
Evangeline Community Health Centre
Pediatric Care and Obstetrics --
Mother/Baby Care

Continuing Care/Seniors
Home Care
Housing
Summerset and
Wedgewood Manors
Stewart Memorial Hospital

Diagnostic/Therapeutics/Support
Regional Environmental Services
Plant Maintenance
Nutrition
Physiotherapy
Electrocardiogram
Radiology
Laboratory
Occupational Therapy
Pharmacy
Chaplain

East Prince Health

Income Support Services
Child Care Subsidy Program
Financial Assistance Program
Family Support Program
Employment Enhancement/Job Creation

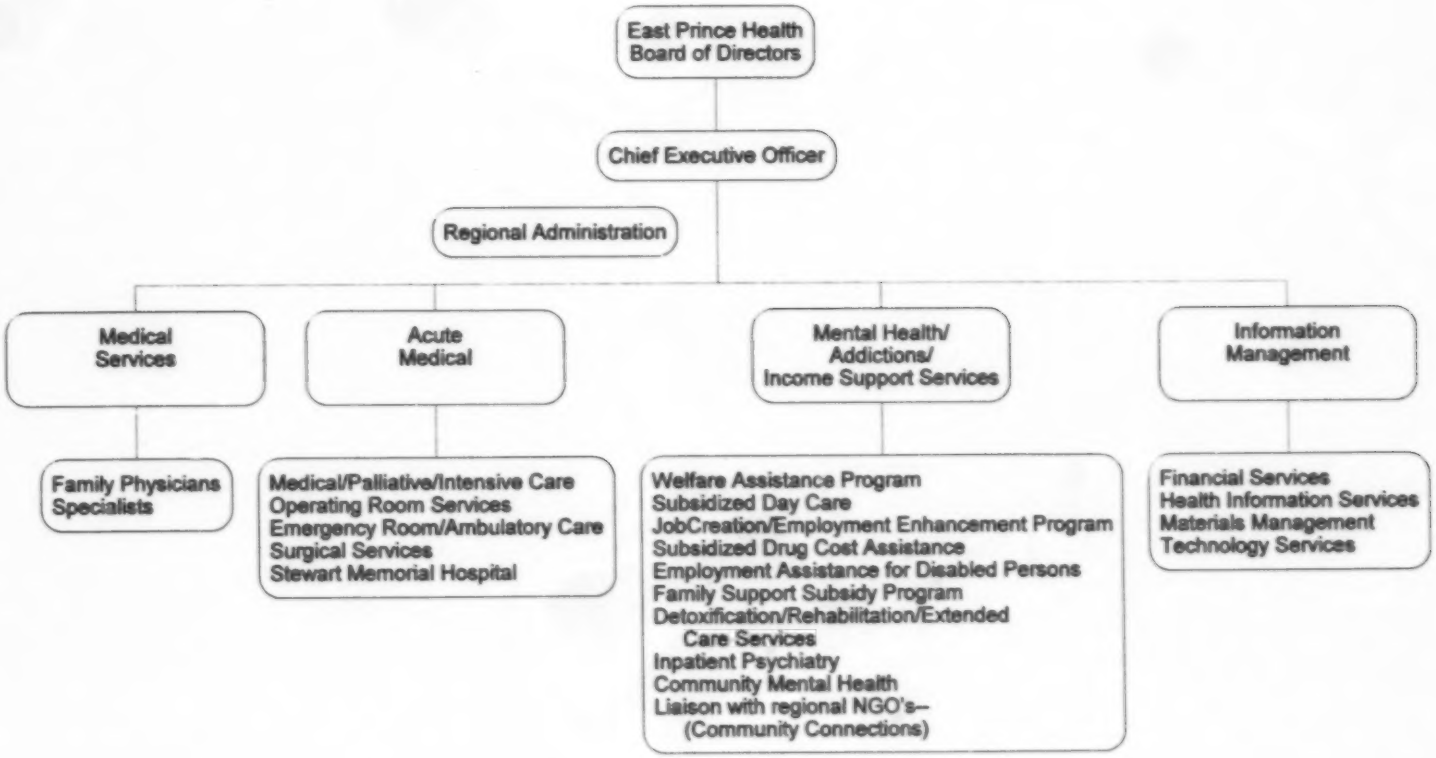
Information Management
Information Systems
Health Records
Materials Management
Regional Finance Office
Admitting/Switchboard

Mental Health/Addictions
Community Mental Health
Prince County Hospital - Psychiatry
Addiction Services

Organizational Development
Development/Education
Labour Relations
Occupational Health and Safety
Development and Community Relations
Risk Management
Regional Benefits
Volunteer Services
Wellness
Human Resource Services

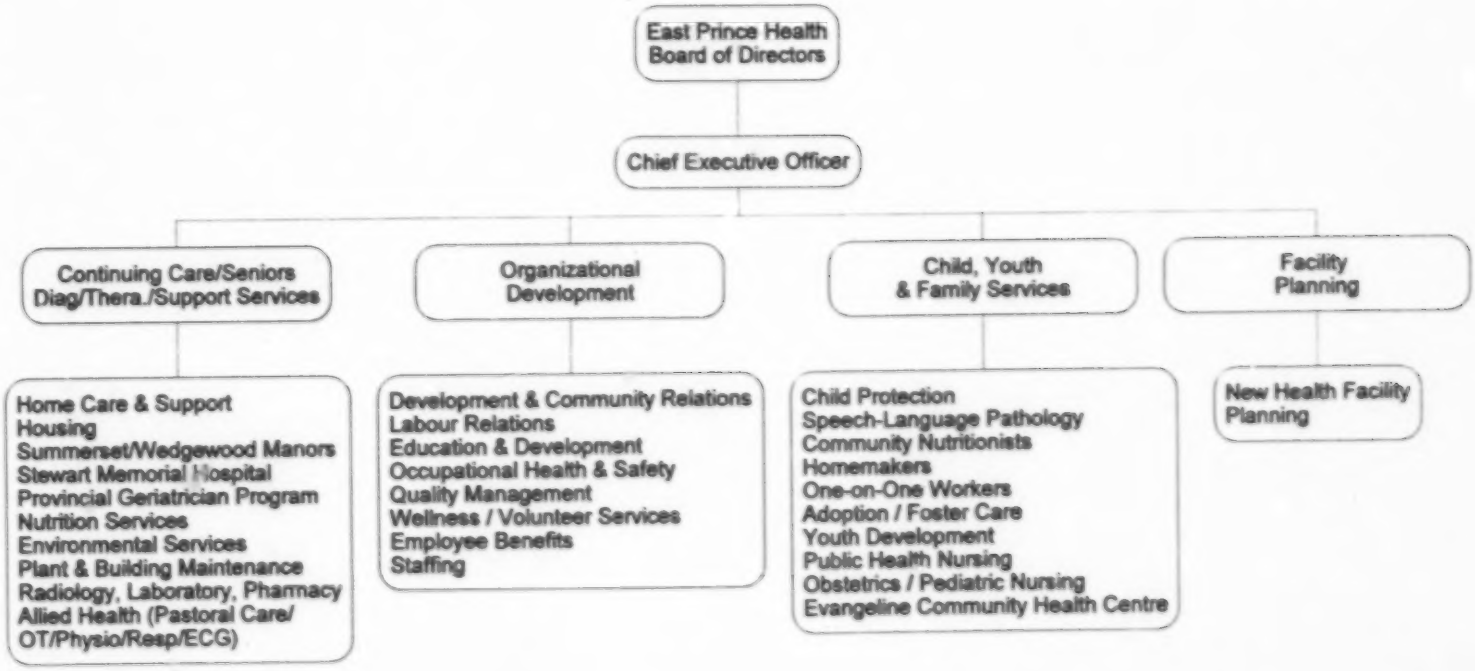
Physician Services

East Prince Health
Organizational Chart



Part A

East Prince Health
Organizational Chart



Part B

Spotlight on the New Health Facility

Over the past year, the effort to plan and construct a replacement facility for the aging Prince County Hospital hit several major milestones. Early in the year, the Master Functional program was completed and approved. This paved the way for architectural design. Bergmark, Guimond, Hammarlund, and Jones in association with Dunlop Architects Inc. were contracted to complete the interior and exterior design work.

Throughout the summer of 2000, preliminary work was completed at the site located off MacEwen Road and Granville Street. A new access road was also constructed at the time. Throughout the year, the Prince County Hospital Foundation engaged in an ambitious $12 million dollar capital campaign to raise funds for new equipment in the facility. Through the generous support of residents and the business community, by spring of 2001, the Foundation had surpassed its goal and raised 13 million dollars.

Throughout late fall and early winter 2000, the facility plans and specifications were reviewed from more than 40 different perspectives. This included the site plan, masonry, structural steel, cabinetry, door locations, hardware, wall and floor finishes, windows, mechanical, electrical, control systems, security systems, lighting and medical gas systems. Facility designs were then completed and government contracted an independent cost consultant to develop an estimated cost to construction.

In early February, plans and specifications were issued for pricing. Following the overall cost consultant's work, a Request for Proposal was given to the East Prince Partnerships Ltd., a consortium headed by local companies M.F. Schurman Ltd. and Fitzgerald and Snow. After a cost submission from East Prince Partnerships and a call for submissions from two other proponents, East Prince Partnerships was awarded the contract to construct the facility.

Aside from construction, the most intensive work ahead relates to the planning effort to equip the hospital and ensure programs within the facility will operate efficiently in their new space.

Planners are challenged to ensure that the movement of staff, equipment and patients in 2003 will be a smooth transition. This will involve extensive planning, training and orientation of staff, physicians and volunteers.

There will be improved information systems and sophisticated building controls such as security systems, heating, air conditioning and radiology services which will all be computerized. Traditional radiology films will be replaced with digital computer images which can be transferred electronically anywhere within P.E.I. or out-of-province locations such as Halifax or Moncton.

East Prince Partnerships began construction in June of 2001. Work processes and technology in healthcare will change dramatically when the facility opens in late 2003. Through an effort which combines healthcare providers, government and the community, planners aim to greatly enhance health services in the East Prince Region as a result of this opportunity.

Prince County Hospital Auxiliary

Although the Prince County Hospital Auxiliary is not directly involved with supplying health services to the community, their objective is to render care and services to Prince County Hospital and the community it serves. To enable the Auxiliary to ensure comfort to the patients, they have various fund-raising projects. This allows them to continue with such services as the television rentals and the baby-clothes closet.

Fund-raising efforts take many forms from raffling items to bake sales to the Wishing Well Gift Shop. The volunteers and members are ready to help with working shifts in the gift shop, and preparing mail outs for the Prince County Hospital Foundation. The Auxiliary's "knitters" keep the gift shop supplied with hand-knit items for sale and help out with hand-knit and sewing for the baby closet.

The Auxiliary is happy and proud to be a part of East Prince Health and to help achieve its goal of community good health and care. In connection with this, the Auxiliary will be an important part of our commitment with the Capital Campaign.

Prince County Hospital Foundation

The year 2000 was pivotal for the hospital Foundation. It was one of growth and change and to illustrate, here are some highlights:

Prince County Hospital
www.pchcare.com

- Annual Campaign "From the Heart" raised $300,000 to replace the heart monitors in the current Intensive Care Unit
- Included in those funds were more than $100,000 raised through our sixth annual Lights for Life celebration in December
- The Foundation instituted a Monthly Giving program which has enabled hundreds of donors to spread out their gifts. In the majority of cases, this has resulted in larger gifts from these donors
- A fresh emphasis was placed on Planned Giving
- The Bring Good Health to Life campaign to equip the new health facility continued to take priority and by year's end the Foundation raised more than $11,250,000 in gifts and pledges
- The Foundation launched a quarterly newsletter 'Caring Connections'
- The Youth Board continued its mandate of promoting healthy messages to our community in relation to youth
- The ongoing partnership with the hospital Auxiliary flourished and continued to prosper

The Foundation staff team

While this outline reflects only the major projects of the Foundation during the year 2000, it does give a sense of the success and dimension of our programs. Ultimately, the Foundation exists to fund equipment for our hospital and as such, always place the needs of the patients first. The community can be assured this will continue to be the case as the Foundation moves through the year 2001 and onward toward the day when the new facility opens its doors.

Capital Campaign Committee

Acute Care Services

Ambulatory Care

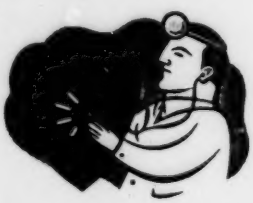
As a continued move in the direction of enhanced ambulatory or short term outpatient care services at East Prince Health, an intravenous (IV) infusion clinic was initiated in January 2001. The purpose was to provide this service to patients in a more appropriate area than the traditional Emergency Department or inpatient areas, improve access to service to avoid previous long waits in the Emergency Department and to take pressure off busy Emergency Department staff.

The establishment of the clinic has been positively received by patients and healthcare providers. Many patients are now scheduled for treatments and procedures related to IV therapy in the IV Infusion Clinic. The services provided include blood transfusions, numerous IV medication therapies (taken anywhere from one to eight hours to administer), mid-line and PIC catheter insertions, flushing of IV devices, and dressing care. Nursing staff at Prince County Hospital a!so facilitate intravenous teaching for patients and families who demonstrate ability to assume some of their self-care at home.

There are many advantages to this clinic for the patient and family. They include improved access to scheduled services, a positive environment for therapy (recliner chairs and music), and ongoing support to maintain as much of their independence as possible. Other advantages include improved staff and physician satisfaction and more effective scheduling of nursing staff to provide this service.

Physician Services

East Prince Health Medical Staff are excited about the prospects of working in a new facility. Physicians are working hard to recruit new physicians to provide primary care and speciality care to the region. There have been organized site visits for prospective candidates in family medicine, emergency medicine, psychiatry, anaesthesia, obstetrics, orthopaedic surgery, and pathology.



Dr. Stacy Champion, General Practitioner, joined the region in October of 2000.

Dr. John Ramessar, with his wife Elena, and family have moved to Summerside in January, 2001. Dr. Ramessar is a radiologist and is actively involved in providing enhanced radiology services as well as planning for the new facility.

Dr. Bruce Fraser has also joined the medica! staff in August, 2001, as a part-time psychiatrist. Dr. Damian Haworth will is joining the family practice department in November of 2001.

East Prince Health has utilized the services of locum physicians to ease the workload on our medical staff while we are recruiting permanent replacements.

Year in Review

Continuing medical education (CME) is a priority for East Prince physicians. There are monthly CME rounds as well as morbidity and mortality rounds. Several family physicians and specialists are preceptors (providing professional on-site guidance) for medical students and residents. This enhances education and is an advantage in recruiting. Dr. Scott Cameron has moved from family practice in the community to providing full-time emergency room services and is head of the emergency department. This allows busy family physicians to spend more time in their offices.

Dr. Mark Triantafillou resigned as Medical Director and Chief of staff to accept a position as Director of Mental Health for the Province. Dr. Paul Kelly has assumed the role as Chief of Staff for the region.

Medical staff will miss the active presence of Dr. Jim Saunders who retired from his very busy family practice. He is very much present as a confidant to his colleagues and as an assistant in the operating room.

Child, Youth & Family Services

Public Health

Literacy for Pregnant and Parenting Youth Program (LiPPY)

The Literacy for Pregnant and Parenting Youth, (LiPPY) project, funded by The National Literacy Secretariat, has completed its second and final year of funding. Partners included The Home and School Federation, Western School Board, East Prince Laubach Literacy Council, Departments of Education and Health and Social Services, Francophone Community and East Prince Health.

The total number of young single parents referred to this project in East Prince numbered 109 over the two-year period, with 125 children aged 0-6 years. Almost 85% of these young parents did not have their grade 12 education. Research confirms that 80% of these teens quit school, creating a cycle of increasingly more complex problems regarding health, housing, employment, and lifestyle choices.

The accessibility of the LiPPY Coordinator in the school, proved to support pregnant and parenting youth in "managing" their school and home life. This positive influence worked to encourage these individuals to stay in school.

The P.E.I. Department of Education has now approved one teaching position in the Western School Board region to work with pregnant and parenting youth on their education plans which commenced in September 2001.

At its conclusion, the LiPPY Committee is very pleased to report that this project has achieved success in working to improve literacy skills for pregnant and parenting youth in the East Prince region of P.E.I.

Chickenpox (Varicella) Vaccine Program

East Prince Health, along with the Island's four other health regions, was pleased to announce the addition of a new vaccine against Chickenpox. P.E.I. was the first province in Canada to initiate this vaccine as part of the immunization program offered by Public Health Nursing.

Chickenpox, a contagious disease which 95% of children catch by age 12, is caused by the varicella-zoster virus. About one in 20 children will develop complications such as bacterial infection in the skin/blood or chickenpox infection in the heart, joints, lungs (pneumonia), or brain (meningitis). Later in life, the infected person may have shingles as the virus remains in the nerve endings for many years. Each year in Canada, a number of children die of chickenpox. This vaccine is offered to all children at 12 months of age.

Parent Information Sessions (Postnatal Classes)

In March 2001, the Child, Youth, and Family program at East Prince Health launched a series of information sessions for new parents. The sessions are designed to prevent illness and to promote the wellness of children and families in the East Prince region. Topics for these groups include: childhood illnesses, continuing with breastfeeding, nutrition information, communicating with babies, and adjusting to parenthood.

Another future topic includes childhood development. Each group is lead by a health care professional who has an interest and experience dealing with the topic. For example, the Communicating with Babies group is lead by a speech and language pathologist. The classes are open to anyone and are free of charge. The information is most relevant to parents of babies 0-6 months of age with some of the topics being of interest to parents of children up to two years of age. Parents can benefit from the groups soon after the birth of their baby or may decide to go beyond the six-month stage. With a wide range of group options, parents can choose the topic which is most relevant to them.

Évangéline Health Centre

This health centre has carved out a place for itself in the Évangéline francophone community and in the past year was the recipient of 1 of 20 awards made by the Maritime Centre of Excellence for Women's Health. The Maritime Centre, located in Halifax, NS, serves all four Atlantic Provinces. It is one of five such centres across Canada, funded by Health Canada to explore and research issues related to women's health.

The centre is located in Wellington, a village in the heart of the East Prince Health region and serves a population of more than 3,000 people. Staff at the centre provide front-line care as well as health promotion and prevention programs and are part of the East Prince Health team of health care providers.

Prior to the opening of the CSC Évangéline, a survey had revealed the health needs of the Acadian community: peri-natal care, care for children aged zero to six years and their family, school and community health, and a resource and an information centre. These areas have received priority since its opening.

The Centre has held four women's wellness clinics which offered the services of a physiotherapist, a nutritionist, a mental health counselor, and a pharmacist. People made selections from a variety of information stations, seeking the information they needed.

Obstetrics and Pediatrics

In order to support and enhance patient care within East Prince Health, Obstetrics and Pediatrics have continued to provide patients and family members with the opportunity to give feedback concerning the care they have received during their hospital stay.

A departmental feedback survey indicated that in excess of 90% of patients receiving services in Obstetrics and Pediatrics were satisfied or very satisfied with the services they received.

The goal of this initiative is to ask patients and their families what they believe staff are doing well and where they see possible improvements. The region had the opportunity this past year to have patients interviewed by members of the Canadian Council on Health Services Accreditation and again the response was very positive.

Child and Family Services

A new Child Protection Act was passed by the Provincial legislature this year. The new Act, targeted for implementation on January 1, 2002, clarifies the role and responsibilities of child prctection services throughout the province.

Regional Child Protection statistics for 2000-2001:

- 80 children in care (total for the year)
- 22 regular foster homes; 1 respite foster home; 8 kinship homes
- 441 intake referrals

Speech-Language Pathology

- 160 clients - the majority of whom are children
- adult population is mainly stroke, cancer and accident victims
- major workload demands are for high needs children using a team approach
- many new tools/technology are needed to assist these children/families which require ongoing professional development

Community Nutrition Services

- Number of prenatal clients opened as new cases: 55
- Number of prenatal classes: 11
- Number of participants: 114 (59 moms and 55 partners)

Family Focus

Preparation for Independent Living Group was completed with 11 youth participating. Several of the youth were children in care. Topics included self-affirmation, communication skills, assertiveness, how to look for a place to live and work with a landlord, gaining access to resources in the community, how to manage money, good nutrition, shopping for food and food preparation. Service was made available to 47 families. Of these, 40 received direct service from a family resource worker; 7 families did not wish to proceed with the referral.

A Parent Support group was held in October 2000 and an Active Parenting of Teens group was held in February 2001.

Continuing Care / Seniors

Home Care

Over the past year, the East Prince Health Home Care team has been busy delivering numerous services to the residents of East Prince. The team provides a variety of services to enable people to remain at home when home is the most appropriate place for the client to be during the care process.

This past year, the Home Care team participated in the Rural Palliative Care Project, a partnership effort with the Southern Kings region of P.E.I. and the Northern region of Nova Scotia. The project has provided valuable education for team members and enabled Home Care to improve upon and better coordinate services to palliative care clients.

A liaison project with Prince County Hospital has resulted in a Home Care team member being present twice a week at the hospital to better serve clients who need care beyond their hospital stay.

The dialysis program, for the first time in many years, provided service to out-of-province clients as part of a provincial partnership with the Queen Elizabeth Health Sciences Centre in Halifax.

This year, Home Care team members have seen an increase in the referrals to Adult Protection services. There are two designated Adult Protection workers - one with Home Care and one with Housing services.

Year in Review

The total Home Care caseload remains around 400 clients. However, there has been an increase in caseload turnover with more clients being admitted and discharged monthly.

Both nursing and homemaker services have seen an increase in daily clients. For both services this may involve palliative care, short-term daily nursing care or daily personal care.

Senior Citizens Housing Program

This program provides 318 units for seniors in communities across the East Prince region. Tenants are selected on the basis of need for housing assistance. The program is funded jointly by the federal and provincial governments.

There were 61 new applicants for East Prince apartment units in 2001 and 47 applicants were placed throughout the year. The program's Emergency Repair service approved 29 applications throughout the year.

East Prince Health also provides support to the local Family Housing Board for low income housing in the region.

Wedgewood Manor & Summerset Manor

Throughout the past year there was much activity at Summerset and Wedgewood Manors. Various in-service education programs were held to better equip staff with skills for their daily challenges.

In service and continuing education continue to be an integral part of providing caregivers with much needed tools to keep pace with the ever changing health care needs of long term care residents. Numerous staff participated in a 40 hour Alzheimer care giver program. There was also a Hospice/Palliative care giver course offered in partnership with the Island Hospice Association. These were just two of many educational opportunities offered.

A Day program at Summerset Manor was offered as a joint effort between Manor and Home Care staff. The program involved bathing residents, providing meals and recreational activities.

There is much activity in Long Term Care at East Prince Health, whether it is enhancement to daily living, educational opportunities or activity programming.

Spiritual Care of Manor residents is an important and essential part of the care process, with this in mind the regional Pastoral Committee developed a Policy and Procedure for the region with a section specific for Long Term and Continuing Care.

Year in Review

The main goal of the Chapman Centre Day program is to support people who live in their own homes by providing support services which include personal care, social programs, nutritional needs, and education to enable people to remain in their home.

Volunteers play an active role in enhancing the lives of long term care residents. Through the assistance of these talented people, manors provide a wide variety of programs. Activities include sing songs, chats with residents, social teas and bingo. Another popular activity is the Dog Therapy Program which exposes residents to the love and affection of dogs accompanied by volunteers at the Manors.

This past year, many manor volunteers received recognition for 20, 25, and 30 years of service by the Rewards & Recognition Committee of East Prince Health.

Once again long term care benefitted from the services of community youth through the Health Care Futures Initiative Summer Career Placement Program. First year Bachelor of Nursing Students were also able to draw on their experiences at the manors as they head back to school or prepare for a career.

Applications for long term nursing home placements are increasing as client demographics increase for this age sector. On average there were 12 clients waiting for long term care placement at any given time throughout the year. The placement committee has been very effective in assuring residents are placed in an orderly fashion as beds become available.

Year in Review

Wedgewood Manor Auxiliary

The Wedgewood Manor Auxiliary is made up of approximately 14 volunteer members who meet once a month. The objectives of the auxiliary are:

- to help the residents of the manor maintain a link with the community;
- to help make life more cheerful for residents, especially those without relatives to visit them;
- to establish a significant number of one-to-one relationships with members as membership allows; and
- to raise monies for various projects at the manor that will be of benefit to the residents.

The Auxiliary feels that their service falls under the area of quality health because they try to improve the quality of life for the residents by planning and implementing various evenings of entertainment for residents throughout the year.

At times, their focus is on raising funds to purchase needed items as requested by the different departments in the manor. This is done by holding an annual spring Rock-a-Thon, Flea Market, Bake Sale, and Autumn Lottery. Some items the Wedgewood Manor Auxiliary has purchased for the comfort of residents are blanket warmers, roho cushions for wheelchairs, lifts, century tub scales, ear thermometers, special eating utensils, VCRs, and other items. Fund-raising continues to be a challenge as many organizations are striving for donations.

Although the Wedgewood Manor Auxiliary is not a large group, they continue to "make a difference" in improving the quality of life for those in the manor.

Summerset Manor Auxiliary

Summerset Manor Auxiliary, a manor support group, continues to be very active. This group, with a membership of twenty five, meets monthly.

The main focus of the Auxiliary is to raise funds to purchase specialized equipment which provides comfort and enjoyment for manor residents. Events such as the annual Penny Auction, Spring Tea, bake sales, and craft sales are the main source of income. The support of the community is very welcome and certainly contributes to the group's fund raising efforts.

During the past year, the Auxiliary purchased an electric bed, wheelchairs, mattresses as well as providing money for social events for the residents.

The Auxiliary is pleased to be a component of East Prince Health and the group is pleased to be contributing to the purpose and vision of the organization.

Stewart Memorial Hospital - working closely with the community

Stewart Memorial Hospital continues to provide a wide range of services to Tyne Valley and surrounding areas. Services include long-term care beds, respite care, acute care and observation, palliative care, convalescent, emergency room and outpatient care. The facility is well known for its many partnerships with the community and enjoys a wide range of community support programs.

The Stewart Memorial Hospital Foundation, Footcare Clinics, Ladies Auxiliary, Happy Valley Seniors Group, Meals on Wheels program and Pastoral Care Committee all offer a variety of lively, community support to hospital operations.

The most significant accomplishment over the past year was the installation of ceiling lifts, which was made possible through Stewart Memorial Hospital Foundation funding. The community and staff have found that this initiative has promoted a safe and efficient quality of care. The hospital foundation's Home Care Equipment Loan Program continues with great success.

During this past year, Stewart Memorial Hospital experienced challenges in recruiting registered nursing personnel. As a result, five convalescent care beds were temporarily closed during that period until the core complement of staff was hired.

Diagnostics / Therapeutics / Support Services

Allied Health Services

Asthma Education Program

Shared funding from the East and West Prince Health regions and the Canada /P.E.I. Agreement on the Promotion of Official Languages enabled East Prince Health to establish a Community Asthma Education Program for Prince County. Staffing consists of a bilingual respiratory therapist and bilingual secretary.

The Asthma Program will run three days a week and offers service in various locations throughout East and West Prince. The clinic is located in Wedgewood Manor on a temporary basis until it moves to the new health facility on Granville Street.

Asthma has been a major health concern to many Islanders of all ages with national statistics indicating that P.E.I. has a higher-than-normal incidence of asthma. Many school and work days are lost due to frequent acute episodes of asthma which impacts on the quality of life of all those involved, namely patients and families. The main purpose of the clinic is to educate people with asthma and their families on how to achieve better control of their asthma and avoid repeat visits to the emergency room, hospitalization, and interruption of their lifestyle.

The Prince County Community Asthma Education Program was scheduled to open in October 2001.

Respiratory Therapy

An additional part-time Respiratory Therapist has been added to the Respiratory Therapy department at Prince County Hospital, allowing for development of more educational opportunities for patients with chronic respiratory problems.

Occupational Therapy

Funding from the Canada /P.E.I. agreement on the Promotion of Official Languages enabled the creation of a bilingual Occupational Therapist position. This new position will offer Occupational Therapy services to clients of all ages and throughout East Prince Health.

Palliative Care Program

The East Prince Health Palliative Care Program was implemented in April 2000. More than 65 clients from various care settings in the region were registered with the program in the first year.

Initial program data reveals that clients are spending the majority of their time in the program at home with supports from family and friends, doctors, nurses, homemakers, volunteers and many other team members. Healthcare team members are supported by the regions' palliative care resource team that meets for clinical rounds on a weekly basis. The goal of the program is for a coordinated and seamless approach to care in whatever care setting the client and family choose (at home, in hospital, or in long term care).

Income Support Services

Disability Support Program

A new Disability Support Program at Income Support Services was established to offer easy-to-understand personalized service and support for individuals and families affected by disability.

The program is committed to all Islanders who have a disability and are overcoming physical and social system barriers, achieving financial independence and attaining a satisfactory quality of life.

Program components include the areas of: employment/vocational, child and adult disability. Various subcategories include respite care, community living supports, community participation, specialized community supports and assistive devices/medical supplies.

The goals for the Disability Support Program involve promotion of opportunities which will allow all persons with disabilities to achieve their desired level(s) of independence. The program works toward enhancing the quality of life for all individuals who have a disability.

The start date for this program was October 1, 2001. A Disability Support Team was involved in extensive training prior to beginning of the program. The Disability Support Team is highly skilled and very enthusiastic to deliver this new Provincial Program in the East Prince region.

Mental Health / Psychiatry / Addictions

Prince County Hospital Psychiatry Unit

Dynamic Group Psychotherapy

The development of a very unique model of group psychotherapy resulted from observation of the numbers of individuals, in hospital and community, who suffer from a wide variety of symptoms related to anxiety. Traditionally, these kinds of difficulties are addressed through one-on-one counseling and medications, with temporary relief of symptoms.

With the encouragement and teaching of Dr. Chris Stewart, Psychiatrist, the unit put forth the idea of offering group therapy to individuals in the community. The therapy was based on an adaptation of a model of individual psychotherapy developed and researched by Dr. Davanloo, a psychiatrist working out of McGill University.

This powerful treatment approach allows an individual to engage in unconscious mental processes and achieve relief/cure of symptoms and personality disturbances. The beauty of applying this type of dynamic psychotherapy in a group setting is that patients, who might otherwise be overwhelmed or highly defended in one on one treatment, can work on a very manageable and yet effective way with others in group therapy. One person's work in groups often has great relevance for the others -- allowing them to, over time, increase their tolerance for anxiety and underlying feelings.

All along, the Psychiatry Unit has documented patients' reports of significant life changes as a result of group therapy in the areas of relationships, work, everyday functioning, etc. with major decreases in overall anxiety levels. Beginning last fall, the Psychiatry Unit felt it important to measure treatment effectiveness on a more objective level and incorporated a pre, during and post assessment of quality of life indicators. Dr. Stewart has continued to provide teaching and ongoing supervision by observing one group on a regular basis. Very recently, we received consent from the other group to videotape the sessions allowing for further supervision.

After running two groups in the community for about two and a half years, the unit prepared to offer a third group in 2001 in response to the 16 individuals who have been on a waiting list for up to three months.

It clearly has been a challenging, exciting and rewarding opportunity to engage in this treatment approach.

Addiction Services

September 2000 to January 2001 was a time of major changes for Addiction Services at East Prince Health. As part of the three-year Addictions plan announced by the Honorable Mildred Dover in 1999, the inpatient detox beds were converted to an ambulatory (outpatient) program in Summerside. This entailed realigning staff, altering the work space, purchasing new resources, training staff on the new Pathways program, screening/assessment techniques, and referrals to the new provincial addictions facility in Mount Herbert.

In addition to all of these changes, our staff were also responsible for the establishment of the ambulatory detox program at the Western Hospital in Alberton. This involved setting up office and classroom space, as well as familiarizing the staff and public in West Prince with the ambulatory detox program.

The rationale for converting the inpatient program to an outpatient program in East Prince was to assist individuals earlier in their addiction and to increase the number of female clients. When East Prince Addiction services provided inpatient detox service, 11.4% of clients were female. When the region converted inpatient services to outpatients services, the female client population increased to 32.1% of clients served.

Further to these changes, in January 2001, the Honorable Jamie Ballem announced the commencement of the Tobacco Dependency Program which is offered by the nursing staff of the Detoxification Program. The program is proving to be popular as time passes. Admissions for the program (February-March 2001) consisted of 17.6% of the total clients who accessed outpatient detox programs.

Regional Initiatives

Development/Education

Continuous Learning -- helping East Prince Health stay competitive

Education and development for our staff, physicians and volunteers are a high priority within East Prince Health. Even in these times of tighter budgets and higher costs for training, East Prince Health directors and managers have been very strategic in their quest to align employee training needs with departmental and organizational training requirements to gain the best benefits from the spending of their training and education budget dollars.

The East Prince Health Education Calendar, Provincial Government "Learning Centre" programs, university and/or college courses, workshops, distance education programs, self-directed learning programs and subscriptions to the latest technical/professional journals are some of the ways East Prince Health has promoted and provided for continuous learning development.

Aligning the Education Calendar with regional strategic directions has offered "just in time" learning opportunities to assist staff in their day to day challenges whether at work or at home.

With more emphasis being placed on wellness this past year, some of the education programs dealt specifically with the area of personal and workplace health. Heavy workloads and replacement difficulties are ongoing challenges for staff as they strive to attend education and development opportunities. This prompts creative teamwork and cooperative spirit for all teams to resolve.

Volunteerism

Regional volunteers are dedicated to helping others and East Prince Health has been very pleased to celebrate International Year of the Volunteer (IYOV) with special events and recognition activities. The regional Volunteer Services program offers recruiting, training and matching of volunteers to any one of the 13 regional work sites.

Volunteering has often been shown to benefit health. The program promotes volunteering as part of a community experience, working closely with and giving recognition to the many community programs and partners who contribute to a healthy community.

A highlight for the East Prince program was recognizing a very special volunteer, the region's oldest volunteer Enid Birch, as she celebrated 50 years of volunteering with Stewart Memorial Hospital. Enid commented that she began volunteering when volunteering wasn't even a word, and has assisted the hospital with many events, including playing the organ. She was identified at East Prince Health's Reward and Recognition evening as a special honorary recipient.

Along with recognizing staff and physicians, nine volunteers and eight volunteer organizations were honored for their long term service of 20 years or more at the East Prince Health Reward and Recognition event.

Student volunteers have been increasingly involved in regional operations and began assisting with a new evening role at Wedgewood Manor as Hospitality Volunteers.

National Volunteer Week highlighted International Year of the Volunteer and special activities including a featured booth at the Showcase 2001 trade show, a traveling IYOV booth to various work sites, media attention and recognition events at various work sites. Recognition events were hosted at Wedgewood Manor, Stewart Memorial Hospital, and Prince County Hospital and Summerset Manor recognizing more than 450 dedicated volunteers with commemorative IYOV pins and certificates.

New roles for volunteers at work sites include Prince County Hospital's weekly Pre-surgery and Outpatient Surgery clinics. Home Care now offers a new training course for volunteers who can assist with a bereavement follow-up service as coordinated with Hospice and the Palliative Care program.

Wellness Initiatives

Workplace Health: A Partnership with Health Canada

The main goal of health promotion is to assist people to realize that they themselves play the greatest role in the status of their health. That status of health can be a result of the choices they make in their everyday living. In order to support a strong trend of increased public interest in wellness at East Prince Health, Wellness Days were held for both staff and the community. These events were very well attended and proved to be an excellent vehicle for increasing awareness and sharing information to support people to make healthy lifestyle choices.

Wellness has been positioned as an essential and integral component of the services at East Prince Health. The organization recognizes it has a shared responsibility with staff, physicians and volunteers to support them in attaining and maintaining their best possible health. When people give to themselves by creating healthy, balanced lives, individuals are then better able to give back to the community, contributing to healthy, balanced communities.

In November 2000, a partnership was developed with Health Canada to implement their model for workplace health. This model was chosen because of its broader effort to integrate individual and workplace factors that influence health as well as the model's attention to the determinants of health.

The model looks at three broad avenues that impact our overall health and well-being:

1) personal health practices;
2) environment; and
3) personal resources.

A confidential needs-assessment survey developed by Health Canada was distributed to all staff and physicians for the purpose of identifying their health needs and interests. The results were compiled by an outside agency and returned in the form of a profile. The key findings of the survey form the basis for the regional workplace wellness strategy which has been developed and is now in the implementation stage. This strategy is an important blueprint that charts programming direction for the future and responds to the major needs of staff, physicians and volunteers. The strategy sets priorities for personal well-being and the wellness of the organization.

Shared Decision Making at East Prince Health: The Community Labour Management Partnership Project

The Community Labour Management Committee of East Prince Health, through a project funded jointly by the Labour Management Partnerships Program (LMPP) of Human Resources Development Canada (HRDC), developed and pilot tested a process for shared decision making within East Prince Health. Shared decision making is a process which involves two-way dialogue between management and staff to help ensure outcomes of decision-making are positive for the workplace and ultimately the clients served.

This model includes a 9-step process and a formal preplanned approach to guide large and diverse teams efficiently through decision making in complex situations. This model for shared decision making was applied and tested in the context of developing a new process for approving staff summer vacation requests within the Nursing Department of Prince County Hospital.

It was found that the shared decision making model provided an efficient means for this group to achieve consensus decisions on a sensitive and complex issue. Participants reported a high level of satisfaction with the process, and noted further beneficial effects occurring as a result of the process in the areas of staff/management relations. With further refinements, this model holds potential for broad application within East Prince Health, and may be of use for other organizations interested in applying participative group processes to complex decision making situations.

Children's Health

Fair Play – Award Winning Program Teaches Skills of Empathy to Young Children

Fair Play was a joint project of East Prince Health and the East Prince Chapter of the Early Childhood Development Association. Through this project, a comprehensive set of teaching resources was developed in both French and English to assist parents and early childhood educators in teaching young children about empathy.

The teaching resources included:

- the musical theatre presentation "*Shoe Shoe with the Big Feet*" / "*Chou Chou aux grands pieds*," written by Brian Stevens and co-directed by Brian Stevens and Sylvie Toupin;
- a teaching resource kit, which includes a CD featuring all music from the show, the Fair Play Idea Book, The Happy Vest, Sais Sais and Shoe Shoe hand puppets, emotion situation cards, a video of the show, and many other unique and useful resources; and a parent brochure which provided tips for teaching emotional skills at home.

Performances of "*Shoe Shoe with the Big Feet*" / "*Chou Chou aux grands pieds*" were given to all kindergartens in East Prince, French language kindergartens on PEI, grades one and two of the Western School Board, and at numerous public performances throughout the province. The resource kits were distributed to all kindergarten programs in East Prince, and are available for loan to families in East Prince through Kids R First, Public Health Nursing, Child and Family Services in Summerside, Evangeline Community Health Centre and La Coalition actions pour enfants in Wellington.

The Fair Play project organizers received the 2001 Early Childhood Development Association Award of Excellence as an example of best practice in early childhood education.

Funding support for Fair Play was received from the Safer Communities Initiative of the Community Mobilization Program and the Canada / PEI General Agreement on the Promotion of Official Languages. Many local businesses made direct contributions to the program and numerous volunteers from throughout the community gave countless hours of their own time in support of the project.

Prince County Workplace Diabetes Education Project (Pilot)

The overall purpose of the project was to raise awareness and knowledge about risk factors which contribute to the onset of type 2 diabetes and set strategies to minimize these risk factors among the working age population in Prince County. During this first pilot project, emphasis was placed on determining whether workplace-based health promotion education would be viable in Prince County.

A total of 18 presentations were delivered at 14 business sites throughout Prince County to more than 350 employees. While final evaluation of the project is still under way, there was strong employer and employee interest and support in topics related to health promotion and disease prevention related to diabetes education.

East Prince Health and West Prince Health worked with the Prince Edward Island Recreation and Facilities Association in the delivery of this project. The P.E.I. Department of Health and Social Services contributed direct funding and provided project evaluation support through the Departmental Evaluation Unit.

How to contact us:

If you wish to provide any feedback on our services or wish to contribute to our services through volunteerism or involvement in our decision making processes, please do not hesitate to contact us.

Mailing Address:
East Prince Health
Administration
271 Lidstone Avenue
Summerside, PEI
C1N 3G6
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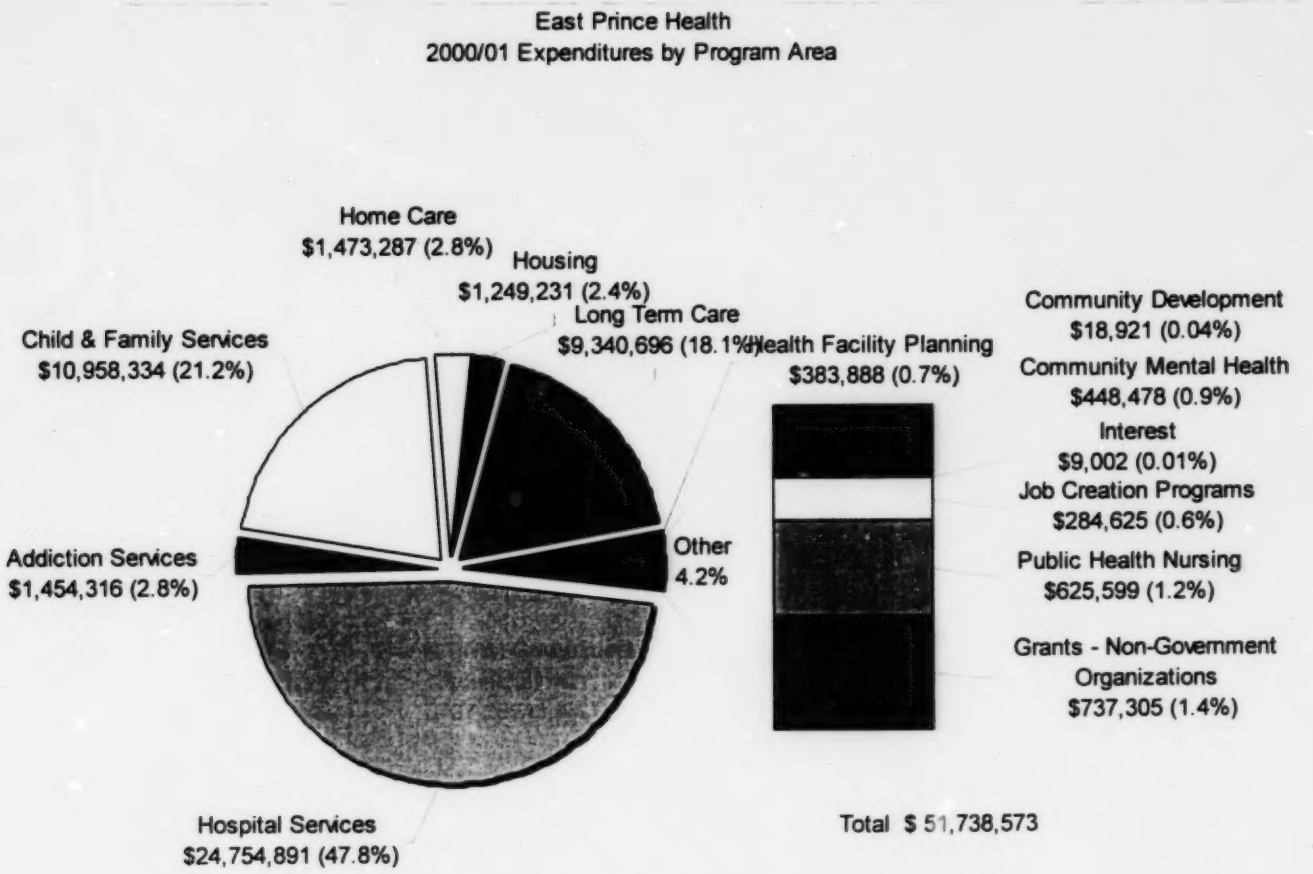
East Prince Health Financials



Service	Expenditure	Percentage
Hospital Services	24,754,891	47.8%
Addiction Services	1,454,316	2.8%
Child & Family Services	10,958,334	21.2%
Home Care	1,473,287	2.8%
Housing	1,249,231	2.4%
Long Term Care	9,340,696	18.1%
Health Facility Planning	383,888	0.7%
Community Development	18,921	0.0%
Community Mental Health	448,478	0.9%
Interest	9,002	0.0%
Job Creation Programs	284,625	0.6%
Public Health Nursing	625,599	1.2%
Grants - Non-Government Organizations	737,305	1.4%
	51,738,573	100.0%

East Prince Health
2000/2001 Expenditures by Program Area

Consolidated Balance Sheet

Assets		
	Current Assets	7,481,664
	Investments	200,000
		7,681,664
Liabilities		
	Current Liabilities	7,544,822
	Long term Debt	136,760
		7,681,582
Equity- Appropriated Fund		82
		7,681,664

Statement Of Revenue and Expenses
For Year end March 31, 2001

Revenue		
	Grants - Health and Social Services	49,610,857
	Fees Donations and Special Projects	2,127,716
		51,738,573
Expenditures		
	Acute Care	24,754,891
	Long term Care	9,340,696
	Mental Health	448,478
	Child and Family	10,958,334
	Job Creation	284,625
	Housing	1,249,231
	Home Care	1,473,287
	Addiction Services	1,454,316
	Health Facility Planning	383,888
	Public Health Nursing	625,599
	Community Development	756,226
	Interest on Long Term Debt	9,002
		51,738,573

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East Prince Health
Financial Statements
March 31, 2001

East Prince Health
Statement of Revenue and Expenses

Year Ended March 31

	2001	2000
Revenue		
Department of Health and Social Services (Note 7)	$ 49,610,857	$ 47,005,968
Patient/client fees	1,309,680	1,448,776
Special projects and other (Note 8)	587,633	401,181
Donations - Prince County Hospital Foundation (Note 9)	230,403	353,940
	51,738,573	49,209,865
Expenses		
Hospital services	24,754,891	23,489,091
Child & Family services	10,958,334	10,343,763
Long term care	9,340,696	8,712,035
Addiction services	1,454,316	1,543,825
Home Care	1,473,287	1,299,724
Housing services	1,249,231	1,201,951
Community Development (Note 10)	756,226	1,017,391
Public Health	625,599	649,267
Mental Health	448,478	462,626
Job Creation Program	284,625	258,993
Health Facility Planning	383,888	221,434
Interest on long term debt	9,002	9,765
	51,738,573	49,209,865
Excess of revenue over expenses	$ -	$ -

See accompanying notes to the financial statements

East Prince Health
Balance Sheet

March 31	2001	2000
Assets		
Current		
Cash - unrestricted	$ 679,391	$ 1,134,537
Cash - restricted (Note 3)	30,307	29,865
Accounts receivable (Note 4)	6,079,926	4,535,347
Prepaid expenses	692,040	170,638
Due from Prince County Hospital Foundation	-	594,165
	7,481,664	6,464,552
Investments in bonds and certificates at cost, estimated market value $210,282 (2000 - $213,146)	200,000	200,000
	$ 7,681,664	$ 6,664,552
Liabilities		
Current		
Payables and accruals (Note 5)	$ 7,498,756	$ 5,927,131
Funds held in trust	30,307	29,865
Current portion of long term debt	15,759	14,955
	7,544,822	5,971,951
Long term debt (Note 6)	136,760	152,519
	7,681,582	6,124,470
Fund balances		
Appropriated Fund (Page 4)	82	540,082
	$ 7,681,664	$ 6,664,552

On behalf of the Board

Board Member

Board Member

See accompanying notes to the financial statements.

East Prince Health
Statement of Fund Balances

March 31	2001	2000
Appropriated Fund		
Fund balance, beginning of year	$ 540,082	$ 572,155
Capital expenditures	-	(32,073)
Transferred back to Prince County Hospital Foundation	(540,000)	-
Fund balance, end of year	$ 82	$ 540,082

See accompanying notes to the financial statements

East Prince Health
Statement of Cash Flows

Year Ended March 31

	2001	2000
Increase (decrease) in cash and cash equivalents		
Operations		
Changes in		
Cash - restricted	$ (442)	$ (1,045)
Accounts receivable	(1,544,579)	137,077
Prepaid expenses	(521,402)	(21,583)
Payables and accruals	1,571,625	312,974
Funds held in trust	442	1,045
	(494,356)	428,468
Financing		
Repayment of long term debt	(14,955)	(14,192)
Advance from (to) Prince County Hospital Foundation	594,165	(156,565)
Decrease in appropriated funds	(540,000)	(32,073)
	39,210	(202,830)
Net (decrease) increase in cash and cash equivalents	(455,146)	225,638
Cash and cash equivalents, beginning of year	1,134,537	908,899
Cash and cash equivalents, end of year	$ 679,391	$ 1,134,537

See accompanying notes to the financial statements.

East Prince Health
Statement of Tangible Capital Assets

Year Ended March 31

	Land	Pavement	Buildings	Equipment	2001 Total	2000 Total
Cost of Tangible Capital Assets						
Opening cost	$ 134,310	$ 57,666	$ 6,974,322	$10,517,134	$ 17,683,432	$ 17,008,513
Additions				516,090	516,090	674,919
Closing cost	134,310	57,666	6,974,322	11,033,224	18,199,522	17,683,432
Accumulated Depreciation						
Opening balance		57,666	4,742,265	5,673,914	10,473,845	10,065,805
Add: depreciation			84,453	332,138	416,591	408,040
Closing balance		57,666	4,826,718	6,006,052	10,890,436	10,473,845
Net Carrying Amount of Tangible Capital Assets	$ 134,310	$ NIL	$ 2,147,604	$ 5,027,172	$ 7,309,086	$ 7,209,587

See accompanying notes to the financial statements

East Prince Health
Notes to the Financial Statements
March 31, 2001

1. Nature of operations

East Prince Health, a non-profit organization, operates under the authority of the Health and Community Services Act, Part III (the "Act"). East Prince Health commenced operations on April 5, 1994 when the Health and Community Services Agency (the "Agency") approved the establishment of the regional health authorities as provided under the Act. The Agency Board also approved the core services that must be available and reasonably accessible to all residents of East Prince.

The core services managed by East Prince Health on behalf of residents of East Prince and the Province of P.E.I. are:

Program/Service

Child and Family Services	Prince County Hospital
Home Care	Public Health Nursing
Housing	Stewart Memorial Hospital
Community Mental Health	Summerset Manor
Prince County Addiction Services	Wedgewood Manor
Job Creation Program	Community Development

2. Summary of significant accounting policies

Revenue recognition

East Prince Health follows the deferral method of accounting for grants for special projects. Grants restricted for special projects are recognized as revenue in the year in which the related expenses are incurred. Unrestricted amounts are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Cash and cash equivalents

Cash and cash equivalents include cash on hand and balances with banks, net of bank overdrafts.

Financial Support Overpayments

Financial support overpayments are recorded as receivable when identified with a full provision as a doubtful account. Recoveries of financial support overpayments are credited to financial support expenditures when received.

Income from Investments

Income from investments is recorded on a cash basis.

2. Summary of significant accounting policies (cont'd)

Tangible Capital Assets

Tangible capital assets are expensed as a component of program costs in the year of acquisition. During the year, capital asset purchases of $516,090 (2000 - $674,919) were expensed. The Region received designated funding for capital purchases in the amount of $405,831(2000 - $604,500) during the year.

Inventory

Inventory in the amount of $433,581 (2000 - $493,676) has not been reflected on the balance sheet.

Appropriated Fund

East Prince Health received $750,000 ($150,000 per year from 1995 to 1999) from the Prince County Hospital Foundation to fund information technology initiatives. The appropriated fund balance had represented the unexpended portion of these funds. The fund is reduced each year by the amount of capital expenditures relating to information technology. During the year $540,000 was tranferred back to the Prince County Hospital Foundation.

Vacation Pay and Retirement Allowances

Vacation pay is recorded as a liability when earned. Retirement allowances are recorded as a liability when an employee meets the eligibility criteria. Retiring allowances are funded separately from the regular funding received from the Department of Health and Social Services except for Prince County Hospital which is funded on an ongoing basis.

Pension Plans

Employees of East Prince Health belong to different pension plans according to their historical workplace. Former hospital employees and all new employees since regionalization are part of the uniform pension plan for employees of all Prince Edward Island hospitals. All other employees are part of the uniform pension plan of the civil service of Prince Edward Island. The hospital pension plan is a defined benefit pension plan for basic pension contributions and a defined contribution pension plan for supplementary pension contributions. According to the most recent actuarial report dated January 1, 1997 employer contributions to the pension plan are sufficient to meet the requirements of the plan and a pension fund surplus existed at that date. The civil service pension plan is the defined benefit pension plan of the Province of Prince Edward Island. For employees belonging to this plan, the employer's share of the benefits plus any additional future actuarial liabilities are assumed by the Province of Prince Edward Island. These pension plans are not reflected in these financial statements.

2. Summary of significant accounting policies (cont'd)

General

These financial statements do not include the assets, liabilities and activities of the Prince County Hospital Foundation, Stewart Memorial Hospital Foundation, or the hospitals' auxiliaries.

Other

East Prince Health acts as an agent for the Province of P.E.I. for the collection of revenues. During the year revenue of $2,762,524 (2000 - $2,899,117) was collected from the following areas:

Long term Care
Housing Services
Home Care
Addiction Services
Public Health Nursing

Revenues collected are not reflected in the body of the financial statements.

3. Cash-restricted	2001	2000
Resident Trust Funds	$ 24,912	$ 21,700
Memorial Trust Funds	5,395	8,165
	$ 30,307	$ 29,865

4. Accounts receivable	2001	2000
Financial Support overpayments	$ 1,265,076	$ 1,283,632
Patients and other	1,116,145	827,801
Department of Health and Social Services	4,960,487	3,710,804
	7,341,708	5,822,237
Less: allowance for doubtful accounts	(1,261,782)	(1,286,890)
	$ 6,079,926	$ 4,535,347

5. Payables and accruals	2001	2000
Trade	$ 3,171,189	$ 1,677,272
Deferred revenue	628,192	391,845
Accrued salaries and benefits	3,699,375	3,858,014
	$ 7,498,756	$ 5,927,131

6. Long term debt	2001	2000
Municipal Development Loan Board debenture payable in annual installments of $23,957 including interest at 5 3/8% maturing in 2008.	$ 152,519	$ 167,474
Less: current portion of long term debt	15,759	14,955
	$ 136,760	$ 152,519

Annual principal repayments over the next five years are as follows: 2002 - $15,759; 2003 - $16,606; 2004 - $17,499; 2005 - $18,439; 2006 - $19,430.

Funds are provided annually by the Department of Health and Social Services for the above repayments.

7. Department of Health and Social Services Funding	2001	2000
Operations	$ 48,854,357	$ 46,220,688
Capital	-	166,074
Health Stabilization Fund	556,500	397,772
Health Facility Planning	200,000	221,434
	$ 49,610,857	$ 47,005,968

8. Special projects and other

During the year, East Prince Health participated in various projects and initiatives, such as the community labor – management partnership project and the rural pallative home care project, whereby funding was provided by project sponsors. The related project expenditures are included in Community Development expenses.

9. Donations – Prince County Hospital Foundation

During the year, East Prince Heath received donations towards the purchase of medical and non-medical equipment in the amount of $318,331 (2000 - $517,000). However, certain equipment acquisitions approved during the year did not occur until subsequent to year end. Accordingly, $87,928 (2000 - $163,060) of donations are included in deferred revenue.

10. Community development

	2001	2000
Grants to non-governmental organizations	$ 737,305	$ 647,500
Evangeline Health Centre	-	225,547
Special projects and other	18,921	144,344
	$ 756,226	$ 1,017,391